

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>12/3/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		<i>68833</i>	<i>5/9/01</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	10	10	1/24/01
2	2	2	5/2/02
3	3	3	7/3/02
4	4	4	7/3/02
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If more than 150 claims or 10 actions  
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